

AUTO CR - LOG SUMMARY #1071904

TYPE: INFO

Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
It is reported that while following up on a complaint register investigation at the address of occurrence, the involved sergeant encountered an aggressive pit bull that emerged from the rear yard, breached a closed gate, and advanced on the sergeant. Fearing for his safety, the involved sergeant fired two shots at the dog. No shots hit the dog.	(None Entered)		

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	MC NICHOLAS, THOMAS P	278	██████████	022 /	LIEUTENANT OF POLICE	M	WHI		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
08-OCT-2014 10:35 - 08-OCT-2014 10:35	██████████	2212	022	176 - DRIVEWAY - RESIDENTIAL	

Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation

Other Involved Parties

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Involved Member	ROCHOWICZ JR, RICHARD A	1900	██████████	022 /	SERGEANT OF POLICE	M	WHI		

Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship

Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

Incident Category List

Incident Category	Primary?	Initial?
20B - GROUP 20 - NOTIFICATIONS SHOTS FIRED - DESTRUCTION OF ANIMAL	Y	Y

Investigator History

Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	01-DEC-2014 10:13	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	01-DEC-2014 10:13	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	12-NOV-2014 02:09	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	12-NOV-2014 02:07	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PRELIMINARY	12-NOV-2014 02:06	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PRELIMINARY	12-NOV-2014 02:06	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	reject
PENDING SUPERVISOR REVIEW	12-NOV-2014 01:05	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	
PRELIMINARY	12-NOV-2014 09:28	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	20-OCT-2014 09:41	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	Needs drug/alcohol reports.
PRELIMINARY	08-OCT-2014 05:22	DEAN, BRUCE	SUPERVISING INV COPA	113 /	
PRELIMINARY	08-OCT-2014 05:21	DEAN, BRUCE	SUPERVISING INV COPA	113 /	
PRELIMINARY	08-OCT-2014 05:19	DEAN, BRUCE	SUPERVISING INV COPA	113 /	
PENDING SUPERVISOR REVIEW	08-OCT-2014 02:53	CAMPBELL, MARTRICE	INVESTIGATOR I COPA	113 /	
PRELIMINARY	08-OCT-2014 11:42	CAMPBELL, MARTRICE	INVESTIGATOR I COPA	113 /	

Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					CAMPBELL, MARTRICE	08-OCT-2014 11:42			
	DOCUMENTS - INTAKE INCIDENT		5	needs final	N	CAMPBELL, MARTRICE	08-OCT-2014 02:50	DELETED		
	DOCUMENTS - INTAKE INCIDENT		2	Prepared by Sgt. Rochowicz #1900	N	CAMPBELL, MARTRICE	08-OCT-2014 02:39	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		5	[REDACTED]	N	HAYES, SHANNON	12-NOV-2014 01:05	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	[REDACTED]	N	CAMPBELL, MARTRICE	08-OCT-2014 02:44	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		15		N	TOUSANT, LISA	12-NOV-2014 09:28	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		5	[REDACTED] - Issuance of Warrant	N	CAMPBELL, MARTRICE	08-OCT-2014 02:47	DELETED		

Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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FACE SHEET (Notification Date: 08-OCT-2014) - LOG #1071904

TYPE: INFO

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	MC NICHOLAS, THOMAS P	278	[REDACTED]	022 /	LIEUTENANT OF POLICE	M	WHI		

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Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation

Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

Initial Incident Category List

Initial Incident Category	Primary?
20B - GROUP 20 - NOTIFICATIONS SHOTS FIRED - DESTRUCTION OF ANIMAL	Y

Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	08-OCT-2014 11:42	CAMPBELL, MARTRICE	

Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	01-DEC-2014 10:13	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	01-DEC-2014 10:13	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
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PRELIMINARY	08-OCT-2014 11:42	CAMPBELL, MARTRICE	INVESTIGATOR I COPA	113 /	

TACTICAL RESPONSE REPORT/Chicago Police Department

1. DATE OF INCIDENT 08-OCT-2014		TIME 10:35:00	2. ADDRESS OF OCCURRENCE [REDACTED]				3. LOCATION CODE 291	4. BEAT/OCCUR 2212					
MEMBER INVOLVED <input checked="" type="checkbox"/> DNA SUBJECT INFORMATION	5. POSITION 9171	6. LAST NAME ROCHOWICZ JR	7. FIRST NAME RICHARD A	8. STAR NO. 1900	9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	10. RACE CODE WHI	11. AGE [REDACTED]	12. HT. 601	13. WT. 190				
	14. DATE OF APPT. 02-JAN-1992	15. EMPLOYEE NO. [REDACTED]	16. UNIT & BEAT OF ASSIGNMENT 022 2262	17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off	18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No							
	20. LAST NAME		21. FIRST NAME	22. M.I.	23. SEX <input type="checkbox"/> 01 M <input checked="" type="checkbox"/> 02 F	24. RACE	25. D.O.B. [REDACTED]	26. HT. [REDACTED]	27. WT. [REDACTED]				
	28. ADDRESS		29. TELEPHONE NO.	30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No							
	33. WHERE WAS MEDICAL TREATMENT OBTAINED?		34. BY WHOM?	35. CONDITION <input type="checkbox"/> 03 Hospitalized	01 Apparently Normal <input type="checkbox"/> 04 Not Hospitalized	02 Under Influence <input type="checkbox"/> 05 Refused Medical Aid							
	36. CHARGES PLACED					<input checked="" type="checkbox"/> DNA	37. CB NO. [REDACTED]	IR NO. [REDACTED]	<input checked="" type="checkbox"/> DNA				
	REASON FOR USE OF FORCE (Check all that apply) <input checked="" type="checkbox"/> DNA	38. SUBJECT'S ACTIONS DID NOT FOLLOW VERBAL DIRECTION <input type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER _____		ACTIVE RESISTER FLED <input type="checkbox"/> PULLED AWAY <input type="checkbox"/> OTHER _____		ASSAILANT:ASSAULT IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____		ASSAILANT:BATTERY ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____		ASSAILANT:DEADLY FORCE USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____			
		MEMBER'S RESPONSE MEMBER PRESENCE VERBAL COMMANDS ESCORT HOLDS WRISTLOCK ARMBAR PRESSURE SENSITIVE AREAS CONTROL INSTRUMENT OC/CHEMICAL WEAPON W/AUTHORIZATION OTHER _____		OPEN HAND STRIKE TAKE DOWN / EMERGENCY HANDCUFFING OC CHEMICAL WEAPON CANINE TASER (Probe Discharge) TASER (Contact Stun) TASER (Laser Targeted) TASER (Spark Displayed) OTHER _____		ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____		KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/> OTHER _____		FIREARM <input type="checkbox"/> OTHER _____			
		39. * OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) [REDACTED]					40. ADDITIONAL INFORMATION R/SGT FOLLOWING UP ON A CL INVESTIGATION AT ADDRESS OF OCCURENCE WHEN AN AGGRESSIVE PIT BULL EMERGED FROM THE REAR YARD BREACHED A CLOSED GATE ADVANCED ON R/SGT. FEARING FOR SAFETY, R/SGT FIRED TWO SHOTS IN THE DIRECTION OF THE DOG. NO SHOTS HIT THE DOG						
		POSITION		STAR NO.	UNIT	41. WEAPON TYPE <input checked="" type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 07 OTHER		42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors	43. LIGHTING CONDITIONS <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial	44. WEATHER CONDITIONS CLEAR			
49. TASER DART ID NO.		50. WEAPON SERIAL NO. (Include Letters)		51. CHICAGO GUN REG. NO.		52. IL FIREARM OWNER ID. NO. [REDACTED]	53. HANDGUN CERTIFICATE NO. [REDACTED]						
54. SPECIAL WEAPON CERTIFICATE NO.		55. PROPERTY INVENTORY NO.		56. TYPE OF AMMUNITION USED Department Issued		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER. 1	58. TOTAL NO. OF SHOTS MEMBER FIRED 2						
59. WHO FIRED FIRST SHOT <input type="checkbox"/> 03 OTHER (SPECIFY) <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO		61. NO OF CARTRIDGES/SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 03 OTHER (Specify) <input checked="" type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST)		70. EVENT NO. [REDACTED]					
63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 03 OTHER (Specify) <input checked="" type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW		64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO									
66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) DNA					67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input checked="" type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.								
68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input checked="" type="checkbox"/> 04 UNKNOWN					69. POSITION OF MEMBER DISCHARGING WEAPON <input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)								
71. R/NO. [REDACTED]													
72. CASE INFO.		NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT.& W.C./DIST. OF OCCUR. NOTIFICATIONS (FIREARM INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT.& W.C./DIST. OF OCCUR. <input checked="" type="checkbox"/> OP COMMAND <input checked="" type="checkbox"/> DET. DIV. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.											
SIGNATURES		73. REPORTING MEMBER (Print Name) ROCHOWICZ JR, RICHARD A 08-OCT-2014 12:10:11		STAR/EMPLOYEE NO. 1900	SIGNATURE [REDACTED]	74. REVIEWING SUPERVISOR (Print Name) MC NICHOLAS, THOMAS P				STAR NO. 278	SIGNATURE [REDACTED]	DATE REVIEWED 08-OCT-2014 12:13:33	TIME

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING: 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

DNA

REFUSED

UNABLE TO INTERVIEW (Specify Reason)

Statement does not apply. This was a weapons discharge in order to deter an overtly aggressive, charging canine (pit bull).

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

Based on the information available at the time of this tactical response report preparation, the reporting captain finds that Sgt. Rochowicz's tactical response was reasonable, prudent and appropriate, and was consistent with the current department policy as it relates to use of force / weapons discharge incidents, and the use of force continuum. Sgt. Rochowicz went to the address of occurrence in furtherance of his investigation of a complaint log number, and was attempting to make contact with one of the parties involved. While attempting contact, he encountered an agitated, large pit bull who used its weight and size to breach a fence and charge directly at him with teeth bared. Sergeant Rochowicz in immediate fear of being attacked fired twice missing the animal but repelling further attack. The canine was not struck, there was no property damage sustained, and there were no injuries to any parties on scene. The discharged shell casings were recovered. All required notifications were made and non-disciplinary log number 1071904 was obtained from IPRA cataloging this weapons discharge incident.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS
WERE IN COMPLIANCE WITH DEPARTMENT
PROCEDURES AND DIRECTIVES.

I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. _____ OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

ALEXANDER, MICHAEL A

SIGNATURE

DATE COMPLETED

TIME

08-OCT-2014 12:58:20

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

- CASE REPORT
- ARREST REPORT
- SUPPLEMENTARY REPORT
- OFFICER BATTERY REPORT
- TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

I.O.D. REPORT

CR INITIATION REPORT

80. TOTAL TRR's THIS EVENT No.

1

CHICAGO POLICE DEPARTMENT
ORIGINAL CASE INCIDENT REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11.388(6/03)-C

RD:

Case ID:

EVENT:

APPROVAL COMPLETE

IUCR: 5081 - Non-Criminal - Other Non-Criminal Property

INCIDENT

Occurrence Location:	Beat: 2212	Unit Assigned: 2212
330 - Other		
Occurrence Date: 08 October 2014 10:34		

RO Arrival Date: 08 October 2014 10:40

VICTIM: Individual

Name: [REDACTED]	Beat: 2212	Demographics	
Res: [REDACTED]		Male	DOB: [REDACTED]
Sobriety: Sober		Black	Age: 19 Years
CPD Officer: No		5'10,	
		150 lbs	
		Brown Eyes	
		Black Hair	
		Medium Hair Style	
		Medium Complexion	

NON OFFENDERS

Other Communications and Availability

Residence Phone: [REDACTED]
 Available Time 08:00:00 - 16:00:00

NON OFFENDERS

PERSON REPORTING OFFENSE: Individual

Name: [REDACTED]	Beat: 2212	Demographics	
Res: [REDACTED]		Male	DOB: [REDACTED]
CPD Officer: No		White	Age: 45 Years
		6'00,	
		210 lbs	
		Brown Eyes	
		Black Hair	
		Short Hair Style	
		Light Complexion	

OTHER

Other Communications and Availability

Residence Phone: [REDACTED]
 Available Time 08:00:00 - 16:00:00

OTHER

Miscellaneous

Victim Information Provided	Flash Message Sent?	No
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OTHER

Property #1	Possessor/User:	
Quantity: 2	Estimated Value: \$200.00	Used as Weapon? No
Description: Pitbulls	Owner: [REDACTED]	Taken/Stolen? No
Color: Gray	Property Type: Other	Recovered? No

Chicago Police Department - Incident Report

RD #: [REDACTED]

OTHER PROPERTIES	Property #2	Possessor/User Unknown		
	Quantity: 2	Inventory #: [REDACTED]		Used as Weapon? No
	Description: Casings			Taken/Stolen? No
Property Type: Other				

NOTIFICATIONS	Request Type	Agency Name	Date	Star #	Name
	Notification	I.P.R.A.	08 October 11:37	104	CAMPBELL,
	Other Notifications May Be In Narrative.				
	Notification	Office Of News Affairs	08 October 11:53	18700	SEDEVIC,
	Notification	121 Bureau Of Internal Affairs	08 October 11:47	2230	SGT,Curry
Notification	O.E.M.C.	08 October 11:50	8290	WILKERSON,	

NARRATIVES	<p>EV: [REDACTED] IN SUMMARY, SGT. RICHARD ROCHOWICZ (PERSON REPORTING OFFENSE) #1900 WENT TO THE LISTED LOCATION REGARDING ANOTHER INVESTIGATION. (LOG#1071530) AS HE WENT UP THE GANGWAY HE OBSERVED TWO PITBULLS GRAY,WHITE IN COLOR IN THE REAR YARD. THE GRAY PIT PROCEEDED TO KNOCK THE GATE OPEN AND RUN AT RICHARD ROCHOWICZ (PERSON REPORTING OFFENSE) PUTTING HIM IN FEAR OF BEING BIT OR SERIOUS PERSONAL INJURY. AT THIS TIME RICHARD ROCHOWICZ (PERSON REPORTING OFFENSE) DISCHARGED HIS WEAPON TWICE INTO THE GROUND CAUSING NO DAMAGE AND NO INJURIES WERE REPORTED. BOTH CASINGS WERE RECOVERED AND INVENTORIED IN DIST 22 INV# [REDACTED]. ALL LISTED NOTIFICATIONS MADE AND TODAYS LOG#1071904. NFI AT THIS TIME.</p> <p>NOTIFICATION: SUPERVISOR ALEXANDER Beat#: 220X Star#: 69 Emp#: Date: 08-OCT-2014 Time: 1055 ONS</p> <p>NOTIFICATION: SUPERVISOR RYAN Beat#: 2299 Star#: 301 Emp#: Date: 08-OCT-2014 Time: 1057 ONS</p> <p>NOTIFICATION: SUPERVISOR MCNICHOLAS Beat#: 2291 Star#: 278 Emp#: Date: 08-OCT-2014 Time: 1057 ONS</p> <p>NOTIFICATION: SERGEANT KETTERING Beat#: 2210 Star#: 1827 Emp#: Date: 08-OCT-2014 Time: 1100 ONS</p> <ul style="list-style-type: none"> - STAR#: 69 NAME: MICHAEL ALEXANDER BEAT: 2200X - STAR#: 301 NAME: MICHAEL RYAN BEAT: 2290 - STAR#: 278 NAME: THOMAS MC NICHOLAS BEAT: 2291 - STAR#: 1900 NAME: RICHARD ROCHOWICZ JR BEAT: 2262 - STAR#: 19937 NAME: DEAN KORBAS BEAT: 2262A - STAR#: 19202 NAME: SAMUEL LAGUNAS BEAT: 2262D - STAR#: 5605 NAME: DANIEL MORRIN BEAT: 2262E 				
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PERSONNEL	Star No	Emp No	Name	User	Date	Unit	Beat
	Reporting Officer	7811	[REDACTED]	GREVE, Timothy, D	[REDACTED]	08 Oct 2014 12:50	022

CHICAGO POLICE DEPARTMENT
ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653
(For use by Chicago Police Department Personnel Only)
CPD-11. 420C(REV. 6/30)

INSTANT UPDATE UNIT COMPLETE

CB
IR
YD

ARREST REPORTING

OFFENDER	Name: [REDACTED]	Male				
	Res: [REDACTED]	Black				
	DOB: [REDACTED]	5' 08"				
	AGE: 20 years	195 lbs				
	POB: Illinois	Brown Eyes				
ARMED WITH Unarmed	Black Hair					
	Short Hair Style					
	Dark Complexion					
	Marks: [REDACTED]					
INCIDENT	Arrest Date: 08 October 2014 11:25	TRR Completed? No	Total No Arrested: 1	Co-Arrests	Assoc Cases	
	Location: [REDACTED]	Beat: 2212		DCFS Ward ?	No	
	290 - Residence		Dependent Children? No			
	Holding Facility: District 022 Lockup					
	Resisted Arrest? No					
CHARGES	1 Offense As Cited 725 ILCS 5.0/110-3			Victim		
	ISSUANCE OF WARRANT			State Of Illinois, Calumet Park, P.D.		
	NO NARCOTICS RECOVERED					
	Warrant No	Issue Date	Type	NCIC/ Leads No	Hold	Bond Amount
	[REDACTED]	18-SEP-14	Bond Forfeiture Warrant	[REDACTED]		Cook
Remarks: WARRANT# [REDACTED] CHARGE: CTTV. HOLD# [REDACTED]. HOLD FOR CALUMET PARK P.D.						

ARREST REPORTING

NON-OFFENDER(S)	VICTIM AND COMPLAINANT			
	Name: STATE OF ILLINOIS, Calumet Park, P.D.	Injured? No Deceased? No DOB: Hospitalized? No Age: Treated and Released? No Comments:		
ARRESTEE VEHICLE	NO ARRESTEE VEHICLE INFORMATION ENTERED			
PROPERTIES	Confiscated Properties : All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.			
	Inv #	Description	Inv #	Description
	PRISONER PERSONAL PROPERTY -			
INCIDENT NARRATIVE	<p>(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)</p> <p>EVENT# [REDACTED] (PERSONAL PROPERTY). COURT KEY-C. HAS I.D. GANG AFFILIATION-DENIED. NAME CHECK REVEALED THE SUBJECT TO HAVE AN OUTSTANDING WARRANT OUT OF ILLINOIS FOR C.T.T.V. NO INVESTIGATIVE ALERT. NO GIPP. NO TDOA. PAROLE STATUS-NEGATIVE. A/O'S RESPONDED TO A CALL TO ASSIST BT.2262 AT [REDACTED] FOR SHOTS FIRED AT A PITBULL DOG BY 2262, WHO WAS INVESTIGATING A COMPLAINT REGISTER NUMBER AT THAT ADDRESS. AS A/O'S WERE ON SCENE, THE RESIDENTS OF [REDACTED] EXITED THE HOME. SUBSEQUENT TO INVESTIGATION, NAME CHECK OF LISTED SUBJECT REVEALED HIM TO HAVE AN OUTSTANDING WARRANT OUT OF [REDACTED] FOR C.T.T.V. SUBJECT PLACED UNDER ARREST AND TAKEN TO 022 FOR PROCESSING. WARRANT VERIFIED VIA LEADS (ALLEN #13337) @ 1140 HRS. WARRANT# [REDACTED]. CHARGE: C.T.T.V. HOLD# [REDACTED]. HOLD FOR [REDACTED]</p>			
COURT INFO	Desired Court Date: Branch: Court Sgt Handle? No		BOND INFO BOND INFORMATION NOT AVAILABLE	

ARREST REPORTING

REPORTING PERSONNEL

ATTESTING OFFICER:

I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.

Attesting Officer: #19937 KORBAS, D R [REDACTED] 08 OCT 2014 12:24

ARRESTING OFFICER(S):

1st Arresting Officer: #19937 KORBAS, D R [REDACTED] Beat 2262A

2nd Arresting Officer: #18020 KOS, E [REDACTED] 2262A

APPROVING SUPERVISOR:

Approval of Probable Cause : #1972 LEWIS, A M [REDACTED] 08 OCT 2014 12:27

ARREST PROCESSING REPORT

LOCKUP KEEPER PROCESSING

INTERVIEW LOG

VISITOR LOG

Holding Facility: District 022 Lockup
 Received in Lockup: 08 October 2014 13:14
 Prints Taken: 08 October 2014 13:20
 Palmprints Taken: Yes
 Photograph Taken: 08 October 2014 13:48
 Released from Lockup:

Time Last Fed:
 Time Called: 08 October 2014 13:52 Phone#: REFUSED
 Cell #: 5
 Transport Details : 2PO 2262A 08-OCT-2014 11:30

VISUAL CHECK OF ARRESTEE

Is there obvious pain or injury? No
 Is there obvious signs of infection? No
 Under the influence of alcohol/drugs? No
 Signs of alcohol/drug withdrawal? No
 Appears to be despondent? No
 Appears to be irrational? No
 Carrying medication? No

ARRESTEE QUESTIONNARIE

Presently taking medication? No
 (if female)are you pregnant? No
 First time ever been arrested? No
 Attempted suicide/serious harm? No
 Serious medical or mental problems? No
 Are you receiving treatment? No
 Transgender/intersex/gender non-conforming? No
 Deaf/hard of hearing-request interpreter for court? No
 Interpreter needed? (indicate language) No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

Cell13

LOCKUP KEEPER COMMENTS:

08 OCT 2014 13:53 5105 MC CRAY, Carle V [REDACTED] :

EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

NO INTERVIEWS LOGGED

NO VISITORS LOGGED

MOVEMENT LOG INFORMATION NOT AVAILABLE

Watch Commander Comments:

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

ARRESTEE PROCESSING PERSONNEL:

		Beat
Searched By:	#18020 KOS, E [REDACTED]	
Lockup Keeper:	#5831 ADAMS II, C W [REDACTED]	
Assisting Arresting Officer:	#11981 FLORES, V M [REDACTED]	2262D
Assisting Arresting Officer:	#12759 OSULLIVAN, D M [REDACTED]	2262E
Assisting Arresting Officer:	#1900 ROCHOWICZ JR, R A [REDACTED]	2262
Assisting Arresting Officer:	#19202 LAGUNAS, S [REDACTED]	2262D
Assisting Arresting Officer:	#5605 MORRIN, D J [REDACTED]	2262E
Assisting Arresting Officer:	#7811 GREVE, T D [REDACTED]	2212
Fingerprinted By:	#5831 ADAMS II, C W [REDACTED]	

APPROVAL PERSONNEL:

CHICAGO POLICE DEPARTMENT

ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11. 420C(REV. 6/30)

IR #/WARRANT CHECK PENDING

CB

IR

YD

RD

EVENT

ARREST REPORTING				
OFFENDER	Name: [REDACTED]	Male		
	Res: [REDACTED]	Black		
	Chicago, IL 60643	6' 01"		
	Unknown	160 lbs		
	DOB: [REDACTED]	Brown Eyes		
AGE: 20 years	Brown Hair			
POB: Illinois	Braids Hair Style			
ARMED WITH Unarmed	Light Complexion			
	Marks: [REDACTED]			
INCIDENT	Arrest Date: 08 October 2014 10:50	TRR Completed? No	Total No Arrested: 1	Co-Arrests
	Location: [REDACTED]	Beat: 2212	Dependent Children? No	Assoc Cases
	290 - Residence		DCFS Ward ? No	
	Holding Facility: District 022 Lockup			
Resisted Arrest? No				
CHARGES	1	Offense As Cited 720 ILCS 5.0/12-3.4-A-1 VIOLATE ORDER PROTECTION Class A - Type M	Victim	[REDACTED]
RECOVERED NARCOTICS	NO NARCOTICS RECOVERED			
WARRANT	NO WARRANT IDENTIFIED			

ARREST REPORTING

NON-OFFENDER(S)	VICTIM AND COMPLAINANT	
	Name: [REDACTED] Res: [REDACTED] Chicago, IL 60643	Beat: 2212
ARRESTEE VEHICLE	NO ARRESTEE VEHICLE INFORMATION ENTERED	
PROPERTIES	Confiscated Properties : All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.	
	PROPERTIES INFORMATION FOR [REDACTED], NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.	
INCIDENT NARRATIVE	(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following) EVENT [REDACTED]; COURT KEY H; SUBJECT HAS NO ID; GANG AFFILIATION DENIED; NO WARRANT OR INVESTIGATIVE ALERTS; ORDER OF PROTECTION [REDACTED]; NO GIPP; NO TDOA. IN SUMMARY, R/O'S RESPONDED TO A CALL OF SHOTS FIRED AT ABOVE LOCATION. WHILE ON SCENE, A/O'S LEARNED THAT OWNER OF HOUSE LOCATED AT [REDACTED] WAS THE PETITIONER OF AN ORDER OF PROTECTION (ORDER OF PROTECTION [REDACTED] ISSUED ON 08 MAR 13-EXPIRES 20 MAR 15, WARRANT ISSUED IN OPEN COURT) AND A/O'S ALSO LEARNED THAT OFFENDER WAS IN THE HOUSE. ORDER OF PROTECTION IS A NO CONTACT ORDER OF PROTECION; THEREBY, VIOLATING THE ORDER OF PROTECTION. VICTIM ALLOWED A/O'S IN THE HOUSE WHERE OFFENDER WAS LOCATED, PLACED IN CUSTODY, MIRANDIZED AND TRANSPORTED TO 022 DISTRICT FOR PROCESSING.	
COURT INFO	Desired Court Date: 22 October 2014 Branch: 61-2 555 W HARRISON ST - Room 40 Court Sgt Handle? Yes	BOND INFO
	BOND INFORMATION NOT AVAILABLE	

ARREST REPORTING

REPORTING PERSONNEL

ATTESTING OFFICER:

I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.

Attesting Officer: #11981 FLORES, V M [REDACTED] 08 OCT 2014 12:50

ARRESTING OFFICER(S):

1st Arresting Officer: #11981 FLORES, V M [REDACTED] Beat 2262D

2nd Arresting Officer: #19202 LAGUNAS, S [REDACTED] 2262D

APPROVING SUPERVISOR:

Approval of Probable Cause : #1972 LEWIS, A M [REDACTED] 08 OCT 2014 12:56

ARREST PROCESSING REPORT

LOCKUP KEEPER PROCESSING

INTERVIEW LOG

VISITOR LOG

Holding Facility: District 022 Lockup
 Received in Lockup: 08 October 2014 14:07
 Prints Taken: 08 October 2014 14:07
 Palmprints Taken: Yes
 Photograph Taken: 08 October 2014 14:29
 Released from Lockup:

Time Last Fed:
 Time Called: Phone#: [REDACTED]
 Cell #: 8
 Transport Details : 2PO 2262D 08-OCT-2014 11:00

VISUAL CHECK OF ARRESTEE

Is there obvious pain or injury? No
 Is there obvious signs of infection? No
 Under the influence of alcohol/drugs? No
 Signs of alcohol/drug withdrawal? No
 Appears to be despondent? No
 Appears to be irrational? No
 Carrying medication? No

ARRESTEE QUESTIONNARIE

Presently taking medication? No
 (if female) are you pregnant? No
 First time ever been arrested? No
 Attempted suicide/serious harm? No
 Serious medical or mental problems? No
 Are you receiving treatment? No
 Transgender/intersex/gender non-conforming? No
 Deaf/hard of hearing-request interpreter for court? No
 Interpreter needed? (indicate language) No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

LOCKUP KEEPER COMMENTS:

EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

NO INTERVIEWS LOGGED

NO VISITORS LOGGED

MOVEMENT LOG INFORMATION NOT AVAILABLE

Watch Commander Comments:

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

ARRESTEE PROCESSING PERSONNEL:

		Beat
Searched By:	GOUGIS, R D	
Lockup Keeper:	GOUGIS, R D	
Assisting Arresting Officer:	#12759 OSULLIVAN, D M	2262E
Assisting Arresting Officer:	#18020 KOS, E	2262A
Assisting Arresting Officer:	#1900 ROCHOWICZ JR, R A	2262
Assisting Arresting Officer:	#19937 KORBAS, D R	2262A
Assisting Arresting Officer:	#5605 MORRIN, D J	2262E
Assisting Arresting Officer:	#7811 GREVE, T D	2212
Fingerprinted By:	GOUGIS, R D	

APPROVAL PERSONNEL:

**BUREAU OF INTERNAL AFFAIRS
INVESTIGATION DIVISION
GENERAL INVESTIGATION SECTION**

**08 Oct 2014
LOG #1071904**

TO: Juan RIVERA
Chief
Bureau of Internal Affairs

ATTN: Robert KLIMAS
Commander
Bureau of Internal Affairs

ATTN: Lt. Susan Clark #320
Bureau of Internal Affairs
Administration Section

ATTN: Lt. Edwin Kaup #771
Bureau of Internal Affairs
General Investigation Section

FROM: Sergeant Joseph Stehlik #1945
General Investigation Section
Bureau of Internal Affairs

SUBJECT: Firearm Discharge Incident – Animal

RESULTS: BAC .000
Reference: WD# [REDACTED]
LOG#1071904
RD# None

**INCIDENT
LOCATION:** [REDACTED]

DATE & TIME: 08 Oct 2014 / 1035hrs.

DSS: Lt. Mike RYAN #301

**INVOLVED
MEMBER:** Sgt. Richard ROCHOWICZ
Star #1900
Employee [REDACTED]

BUREAU OF INTERNAL AFFAIRS
INVESTIGATION DIVISION
GENERAL INVESTIGATION SECTION

08 Oct 2014
LOG #1071904

DOA 02 Jan 1992
DOB [REDACTED]
Unit 022
WD [REDACTED]

NARRATIVE:

Reporting Sergeant received a notification from P.O. WILKERSON #8290 of CPIC at 1120hrs on 26 May 2014 that that there had been a weapons discharge in the 022nd district. This weapons discharge involved one on-duty male officer and an animal.

R/Sgt proceeded to the 022nd District, arrived at approximately 1215hrs and met with the DSS Lt. Mike RYAN #301. R/Sgt was then directed to the involved officer. Sgt. ROCHOWICZ was then presented with the "Notice of Alcohol and Drug Testing Following a Firearm Discharge Incident" form. At 1221hrs R/Sgt conducted the drug test. At 1228hrs R/Sgt began the twenty minute observation period of Sgt. ROCHOWICZ. The breath test was conducted at 1253hrs and the BAC was .000. Capt. ALEXANDER #69 was notified of the results.

Joseph Stehlik #1945

Sergeant Joseph Stehlik #1945
Bureau of Internal Affairs
Investigation Division
General Investigation Section

APPROVED:

Lt. S. C. #300

Commanding Officer
Bureau of Internal Affairs
Administration Section



NOTICE OF ALCOHOL AND DRUG TESTING FOLLOWING A FIREARMS DISCHARGE INCIDENT

CHICAGO POLICE DEPARTMENT

TO: Involved Member's Name SG-7 ROCHOWICZ Title SG-7
Star No. 1900 Employee No. REDACTED Unit 088

The applicable collective bargaining agreements and policy of the Chicago Police Department require those involved in a firearms discharge incident to undergo testing for the presence of alcohol and drugs. You are hereby ordered to submit to this testing and are required to take an alcohol breath test and provide a urine specimen.

Any refusal to take the required tests or refusal to fully comply with the testing procedures will be treated as a violation of Department Rules and will subject you to discipline up to and including separation.

I acknowledge and understand this notice of testing.

Print Member's Name <u>SG-7 ROCHOWICZ</u>	Involved Member's Signature <u>G. Chay</u>	Date and Time <u>800714 1218</u>
Type of Test: Alcohol	Location: <u>088</u>	Date and Time: <u>800714 1253</u>
Type of Test: Drug	Location: <u>022</u>	Date and Time: <u>800714 1221</u>

I have provided notice to the involved member and conducted the alcohol and drug testing as indicated.

B.I.A. Supervisor's Name <u>SG-7 J. STEVENS '1945</u>	B.I.A. Supervisor's Signature <u>Q. A. D. '1945</u>	Date and Time <u>800714 1255</u>
CPD-44.252 (REV. 6/12)		

DISTRIBUTION: ORIGINAL - TO B.I.A. SUPERVISOR, COPY - TO INVOLVED MEMBER.

La^o 1071904

TIME STARTED 1028

TEMPERATURE 22 C

SUBJECT TEST

%BAC TIME

.000 BLANK

.000 AUTO 12:53

OPERATOR

OPERATOR
S. J. Ferguson 1945

WITNESS

One

TEST LOCATION

Loa 1071984

STEP 1: COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE

LAB ACCESSION NO.

A. Employer Name, Address, I.D. No.

 USMIA/CHICAGO POLICE DEPT
 RANDOM DRUG UNIT #10873H
 3510 S MICHIGAN AVE
 CHICAGO IL 60653
 PH: 312-745-5053

B. MRO Name, Address, Phone and Fax No.

FORM ID: SAPHS00020

Site Location:

[REDACTED]

PH:

FAX:

C. Donor SSN or Employee I.D. No.

D. Donor Name: Last: [REDACTED]

First: [REDACTED]

E. Donor ID Verified: Photo ID Emp. Rep. [REDACTED]F. Reason for Test: Pre-employment (1) Random (3) Reasonable Suspicion/Cause (5) Post-Accident (2) Promotion (22)
 Return to Duty (6) Follow-up (23) Other (specify) (99) *PERIODIC DISABILITY*

G. Drug Tests to be Performed:

 39409H SAP 9-50/300 +MOMA/N

H. Collection Site Name:

UNI 7 082

Collection Site Code:

Address:

Collector Phone No.:

City, State and Zip:

Collector Fax No.:

STEP 2: COMPLETED BY COLLECTOR

Read specimen temperature within 4 minutes. Is temperature between 90° and 100° F? Yes No, Enter Remark

Specimen Collection:

 Split Single None Provided (Enter Remark) Observed (Enter Remark)

REMARKS

STEP 3: Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5.

STEP 4: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY

I certify that the specimen given to me by the donor identified in the certification section on Copy 1 of this form was collected, labeled, sealed, and released to the Delivery Service noted in accordance with applicable requirements.

 X *SGT J. J. CHUCK 1945*
 Signature of Collector

 12:21 AM
 Time of Collection

SPECIMEN BOTTLE(S) RELEASED TO:

 Quest Diagnostics Courier FedEx

 Other

Name of Delivery Service Transferring Specimen to Lab

(Print) Collector's Name (First, MI, Last)

Date (Mo./Day/Yr.)

RECEIVED
AT LAB: X

Signature of Accessor

Primary Specimen
Bottle Seal Intact

SPECIMEN BOTTLE(S) RELEASED TO:

 Yes

 No, Enter Remark

STEP 5: COMPLETED BY DONOR

I certify that I provided my specimen to the collector; that I have not adulterated it in any manner; each specimen bottle used was sealed with a tamper-evident seal in my presence; and that the information and numbers provided on this form and on the label affixed to each specimen bottle is correct.

X

Signature of Donor

(PRINT) Donor's Name (First, MI, Last)

Date (Mo./Day/Yr.)

Daytime Phone No. ()

Evening Phone No. ()

Date of Birth / /

Mo. Day Yr.

DRUG TEST SPECIMEN AFFIDAVIT

CHICAGO POLICE DEPARTMENT

INSTRUCTIONS: Prepare in duplicate. Original (White) to Collection Unit; copy (Yellow) to member.

Donor I.D. verified

Photo I. D. b

Employer Representative

Signature of Employer Representative

PART I - A. On the 8 day of Oct, 2014 at 12:21, I, R. Rodriguez,
(TIME) (PRINT NAME)

removed the foil-top seal from a cup, and then removed the contents from the cup. I urinated into this same cup, then I delivered this cup containing my urine specimen to J. STEHLIK 1945, and witnessed this member: (PRINT RECEIVING STAFF MEMBER'S NAME)

B. Break the Tamper Evident Plastic Filament Link between the cap and the base of the vial.

C. Pour a portion of my urine specimen into a vial with the control number printed on it's side.

D. Close the vial cap.

E. Seal the vial with a piece of evidence tape which was placed across the cap and down both sides of the vial. I then initialed the evidence tape with specimen ID number _____

F. Place my specimen in a bag which was closed with self adhesive tape. Then I initialed the barcode label on bag with the number *per 511-265-99* _____

A	B
MAIN TEST VIAL - NO.	ALTERNATE TEST VIAL - NO.

A	B
MAIN TEST VIAL - NO.	ALTERNATE TEST VIAL - NO.

EXAMINEE'S SIGNATURE 	STAR/EMP NO. 1900	WITNESS'S SIGNATURE 	STAR/EMP NO. 12591
RECEIVING STAFF MEMBER'S SIGNATURE 	STAR/EMP NO. 1945	SUPERVISOR'S SIGNATURE 	STAR/EMP NO.

Part II - The urine specimen with the control number [REDACTED] was received and then secured in the appropriate Random Drug Testing Unit refrigerator/freezer compartment by:

R. Deen, or 08 OCT 2014, at 1337.
(STAFF MEMBER'S SIGNATURE) (DATE) (TIME) (EXAMINEE'S INITIALS)

PART III - I attest that the sealed urine specimen bag containing specimen ID number _____
was removed from the Random Drug Testing Unit refrigerator by _____
and then delivered to _____, on _____, at _____.
(RDTU MEMBER)
(LAB MEMBER) (DATE) (TIME)

Specimen received by _____
(LAB MEMBER'S INITIALS) _____ (RDTU MEMBER'S SIGNATURE) _____ STAR/EMP NO _____

RANDOM DRUG TESTING UNIT

ALTERNATE COLLECTION RECEIPT

On the 08 day of OCT. 2014 I RICARDO HERNANDEZ #18979
received a collected urine specimen from SGT. J. STEHLIK #1945. The specimen
was delivered in sealed /unsealed condition and was received in packaging described as:

Select One A clear and blue CPD evidence/property bag containing two tape-sealed vials (including one within a sealed Quest Diagnostics specimen bag).

611

The packaging was then opened by RICARDO FERNANDEZ #18979 in the presence of Sgt. J. STEALIK # 1945. The following items were removed from the container:

Select One One tape-sealed vial labeled # [REDACTED] within a sealed Quest [REDACTED]
Diagnostics specimen bag and one tape-sealed vial labeled # [REDACTED]

635

The specimen vials were then placed in the Random Drug Testing Unit collection site refrigerator/freezer by RICARDO HERNANDEZ #18479, as witnessed by SGT. J. STEPHEN #1945

Specimen delivered by:



1945

Received/stored by:

Signature
Reindeer
Signature

#18979

Last Name: ROCHFORD, C.Z.
First Name: Ricardo
Rank: SGT.
Star #: 1900
Unit: 028
Home Zip Code: _____
Date Hired: 2 Jan 1992
Birthdate: [REDACTED]

08 OCT. 2014

W/D [REDACTED]

Last Name: ROCHDOE, CZ

First Name: Ricardo

Rank: Sgt.

Star #: 1900

Unit: 028

Home Zip Code: _____

Date Hired: 2 Jan 1992

Birthdate: [REDACTED]

RANDOM DRUG TESTING UNIT

ALTERNATE COLLECTION RECEIPT

On the 08 day of OCT. 2014 RICARDO HERNANDEZ #18979 received a collected urine specimen from SGT. J. STEHLIK #1945. The specimen was delivered in sealed /unsealed condition and was received in packaging described as:

Select One A clear and blue CPD evidence/property bag containing two tape-sealed vials (including one within a sealed Quest Diagnostics specimen bag).

or

The packaging was then opened by RICARDO HERNANDEZ #18979 in the presence of SGT. J. STEHLIK # 1945. The following items were removed from the container:

Select One One tape-sealed vial labeled # [REDACTED] within a sealed Quest Diagnostics specimen bag and one tape-sealed vial labeled # [REDACTED]

or

The specimen vials were then placed in the Random Drug Testing Unit collection site refrigerator/fr-ezer by RICARDO HERNANDEZ #18979, as witnessed by SGT. J. STEHLIK #1945.

Specimen delivered by: Ricardo Hernandez # 18979
Signature

Received/stored by: Ricardo Hernandez # 18979
Signature

DRUG TEST SPECIMEN AFFIDAVIT

CHICAGO POLICE DEPARTMENT

INSTRUCTIONS: Prepare in duplicate. Original (White) to Collection Unit; copy (Yellow) to member.

Donor I.D. verified

Photo I. D. by

Sgt J. STEHLIK 1945

Employer Representative

Signature of Employer Representative

PART I-

A. On the 8 day of Oct, 2014 at 1221, I, R. Rorariusz,
(TIME) (PRINT NAME)

removed the foil-top seal from a cup, and then removed the contents from the cup, I urinated into this same cup, then I delivered this cup containing my urine specimen to J. STEHLIK 1945,
(PRINT RECEIVING STAFF MEMBER'S NAME) and witnessed this member:

- B. Break the Tamper Evident Plastic Filament Link between the cap and the base of the vial.
- C. Pour a portion of my urine specimen into a vial with the control number printed on it's side.
- D. Close the vial cap.
- E. Seal the vial with a piece of evidence tape which was placed across the cap and down both sides of the vial. I then initialed the evidence tape with specimen ID number ██████████.
- F. Place my specimen in a bag which was closed with self adhesive tape. Then I initialed the barcode label on bag with the number PL 56426599 ██████████.

A	B
MAIN TEST VIAL - NO.	ALTERNATE TEST VIAL - NO.

EXAMINEE'S SIGNATURE

STAR/EMP NO.

WITNESS'S SIGNATURE

STAR/EMP NO.

Sgt B. Baly

1900

Sgt B. Baly

12591

RECEIVING STAFF MEMBER'S SIGNATURE

STAR/EMP NO.

SUPERVISOR'S SIGNATURE

STAR/EMP NO.

R. Rorariusz

1945

PART II-

The urine specimen with the control number ██████████ was received and then secured in the appropriate Random Drug Testing Unit refrigerator/freezer compartment by:

R. Rorariusz
(STAFF MEMBER'S SIGNATURE)

, on 08 OCT 2014, at 1337

(DATE)

(TIME)

(EXAMINEE'S INITIALS)

PART III -

I attest that the sealed urine specimen bag containing specimen ID number ██████████

was removed from the Random Drug Testing Unit refrigerator by ██████████

(RDTU MEMBER)

and then delivered to ██████████

, on ██████████, at ██████████

(LAB MEMBER)

(DATE)

(TIME)

Specimen received by ██████████

(LAB MEMBER'S INITIALS)

(RDTU MEMBER'S SIGNATURE)

STAR/EMP NO.



NOTICE OF ALCOHOL AND DRUG TESTING FOLLOWING A FIREARMS DISCHARGE INCIDENT

CHICAGO POLICE DEPARTMENT

TO: Involved Member's Name Scott Pochowicz Title Sgt
Star No. 1900 Employee No. ██████████ Unit 088

The applicable collective bargaining agreements and policy of the Chicago Police Department require those involved in a firearms discharge incident to undergo testing for the presence of alcohol and drugs. You are hereby ordered to submit to this testing and are required to take an alcohol breath test and provide a urine specimen.

Any refusal to take the required tests or refusal to fully comply with the testing procedures will be treated as a violation of Department Rules and will subject you to discipline up to and including separation.

I acknowledge and understand this notice of testing.

Print Member's Name <u>Scott Pochowicz</u>	Involved Member's Signature <u>G. Pochowicz</u>	Date and Time <u>8/07/14 12:18</u>
Type of Test: Alcohol	Location: <u>088</u>	Date and Time: <u>8/07/14 12:53</u>
Type of Test: Drug	Location: <u>088</u>	Date and Time: <u>8/07/14 12:21</u>

I have provided notice to the involved member and conducted the alcohol and drug testing as indicated.

B.I.A. Supervisor's Name <u>Sgt J. S. Terrien '1945</u>	B.I.A. Supervisor's Signature <u>J. S. Terrien '1945</u>	Date and Time <u>8/07/14 12:55</u>
DISTRIBUTION: ORIGINAL - TO B.I.A. SUPERVISOR, COPY - TO INVOLVED MEMBER.		

La^o 1071904

TIME STARTED 1228

STEP 1: COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE

LAB ACCESSION NO.

A. Employer Name, Address, I.D. No.

B. MRO Name, Address, Phone and Fax No. FORM 10-100050020

C. Donor SSN or Employee I.D. No.

D. Donor Name: Last: _____ First: _____

E. Donor ID Verified: Photo ID Emp. Rep. _____F. Reason for Test: Pre-employment (1) Random (3) Reasonable Suspicion/Cause (5) Post-Accident (2) Promotion (22)
 Return to Duty (6) Follow-up (23) Other (specify) (99) *PERIODIC DISABILITY*

G. Drug Tests to be Performed:

 39409N SAP 9-50/300 +00000000H. Collection Site Name: *Unit 082*

Collection Site Code: _____

Address: _____
City, State and Zip: _____

Collector Phone No.: _____

Collector Fax No.: _____

STEP 2: COMPLETED BY COLLECTOR

Read specimen temperature within 4 minutes. Is temperature between 90° and 100° F? Yes No, Enter Remark _____

Specimen Collection:

 Split Single None Provided (Enter Remark) Observed (Enter Remark)

REMARKS

STEP 3: Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5.

STEP 4: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY

I certify that the specimen given to me by the donor identified in the certification section on Copy 1 of this form was collected, labeled, sealed, and released to the Delivery Service noted in accordance with applicable requirements.

X 10/08/95
Signature of Collector12:21 AM
Time of Collection10/08/95
Date (Mo./Day/Yr.)

SPECIMEN BOTTLE(S) RELEASED TO:

 Quest Diagnostics Courier FedEx Other

Name of Delivery Service Transferring Specimen to Lab

RECEIVED
AT LAB:

Signature of Accessor

(Print) Accessor's Name (First, Mi, Last)

Date (Mo./Day/Yr.)

Primary Specimen
Bottle Seal Intact Yes
 No, Enter Remark _____

SPECIMEN BOTTLE(S) RELEASED TO:

STEP 5: COMPLETED BY DONOR

I certify that I provided my specimen to the collector; that I have not adulterated it in any manner; each specimen bottle used was sealed with a tamper-evident seal in my presence; and that the information and numbers provided on this form and on the label affixed to each specimen bottle is correct.

X

Signature of Donor

(PRINT) Donor's Name (First, Mi, Last)

Date (Mo./Day/Yr.)

Daytime Phone No. ()

Evening Phone No. ()

Date of Birth / /

Mo. Day Yr.

STEP 6: COMPLETED BY MEDICAL REVIEW OFFICER - PRIMARY SPECIMEN

In accordance with applicable requirements, my determination/verification is:

 NEGATIVE POSITIVE TEST CANCELLED
 DILUTE REFUSAL TO TEST BECAUSE: ADULTERATED SUBSTITUTED

REMARKS _____

X

Signature of Medical Review Officer

(PRINT) Medical Review Officer's Name (First, Mi, Last)

Date (Mo./Day/Yr.)

STEP 7: COMPLETED BY MEDICAL REVIEW OFFICER - SECONDARY SPECIMEN

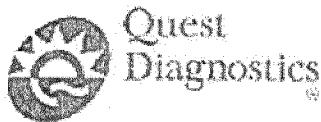
In accordance with applicable requirements, my determination/verification for the split specimen (if tested) is:

 RECONFIRMED FAILED TO RECONFIRM - REASON _____*X*

Signature of Medical Review Officer

(PRINT) Medical Review Officer's Name (First, Mi, Last)

Date (Mo./Day/Yr.)



10/10/2014 5:15:05 AM

Drug Detail Report

PATIENT INFORMATION

Quest Diagnostics Employer Solutions
Customer Care: 800-877-7484

Primary ID: WD148154A

SPECIMEN INFORMATION

REQUISITION: [REDACTED]

LAB REF NO: [REDACTED]

COLLECTED: 10/8/2014 12:21

RECEIVED: 10/9/2014 06:27

REPORTED: 10/9/2014 09:33

DOCUMENT ID: [REDACTED]

CLIENT INFORMATION

[REDACTED]
USHW/CHICAGO POLICE DEPT
3510 S MICHIGAN AVE
CHICAGO, IL 60653
CSL: N/P

Reason: OTHER -- WEAPONS DISCHARGE

Tests Ordered: [REDACTED]

Integrity Checks

Acceptable Range

CREATININE	145.0 mg/dL	>/= 20 mg/dL
pH	5.4	4.5-8.9
OXIDIZING ADULTERANTS	Negative	

Substance Abuse Panel

	Initial Test Level	GC/MS Confirm Test Level
--	--------------------	--------------------------

AMPHETAMINES	Negative	1000 ng/mL	500 ng/mL
BARBITURATES	Negative	300 ng/mL	200 ng/mL
BENZODIAZEPINES	Negative	300 ng/mL	200 ng/mL
COCAINE METABOLITES	Negative	300 ng/mL	150 ng/mL
MARIJUANA METABOLITES	Negative	50 ng/mL	15 ng/mL
METHADONE	Negative	300 ng/mL	200 ng/mL
MDA-ANALOGUES	Negative	250 ng/mL	200 ng/mL
OPIATES	Negative	300 ng/mL	300 ng/mL
OXYCODONES	Negative	100 ng/mL	100 ng/mL
PHENCYCLIDINE	Negative	25 ng/mL	25 ng/mL
PROPOXYPHENE	Negative	300 ng/mL	200 ng/mL

CERTIFYING SCIENTIST: [REDACTED]

SPECIMEN RECEIVED AND PROCESSED IN THE

LAB: Quest Diagnostics-Lenexa
10101 Renner Blvd
Lenexa KS 66219

ADDITIONAL COMMENTS:

Test Type: WEAPONS DISCHARGE mapped to OTHR

CHICAGO POLICE DEPARTMENT

ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11. 420C (REV. 6/30)

FINAL APPROVAL

CB

IR

YD

RD

EVENT

ARREST REPORTING

OFFENDER	Name: [REDACTED]	Male	[REDACTED]
	Res: [REDACTED]	Black	
	Chicago, IL 60643	6' 01"	
	Unknown	160 lbs	
	DOB: [REDACTED]	Brown Eyes	
AGE: 20 years	Brown Hair		
POB: Illinois	Braids Hair Style		
ARMED WITH Unarmed	Light Complexion		
	Marks: [REDACTED]		
INCIDENT	Arrest Date: 08 October 2014 10:50	TRR Completed? No	Total No Arrested: 1
	Location: [REDACTED]	Beat: 2212	Co-Arrests
	290 - Residence		Assoc Cases
	Holding Facility: District 022 Lockup		DCFS Ward ? No
	Resisted Arrest? No		Dependent Children? No
CHARGES	1	Offense As Cited 720 ILCS 5.0/12-3.4-A-1 VIOLATE ORDER PROTECTION Class A - Type M	Victim [REDACTED]
RECOVERED NARCOTICS	NO NARCOTICS RECOVERED		
WARRANT	NO WARRANT IDENTIFIED		

ARREST REPORTING

NON-OFFENDER(S)	VICTIM AND COMPLAINANT	
	Name: [REDACTED] Res: [REDACTED] Chicago, IL 60643	Beat: 2212
ARRESTEE VEHICLE	NO ARRESTEE VEHICLE INFORMATION ENTERED	
PROPERTIES	Confiscated Properties : All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.	
	PROPERTIES INFORMATION FOR [REDACTED]	NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.
INCIDENT NARRATIVE	(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following) EVENT [REDACTED]; COURT KEY H; SUBJECT HAS NO ID; GANG AFFILIATION DENIED; NO WARRANT OR INVESTIGATIVE ALERTS; ORDER OF PROTECTION [REDACTED]; NO GIPP; NO TDOA. IN SUMMARY, R/O'S RESPONDED TO A CALL OF SHOTS FIRED AT ABOVE LOCATION. WHILE ON SCENE, A/O'S LEARNED THAT OWNER OF HOUSE LOCATED AT [REDACTED] WAS THE PETITIONER OF AN ORDER OF PROTECTION (ORDER OF PROTECTION [REDACTED] ISSUED ON 08 MAR 13-EXPIRES 20 MAR 15, WARRANT ISSUED IN OPEN COURT) AND A/O'S ALSO LEARNED THAT OFFENDER WAS IN THE HOUSE. ORDER OF PROTECTION IS A NO CONTACT ORDER OF PROTECION; THEREBY, VIOLATING THE ORDER OF PROTECTION. VICTIM ALLOWED A/O'S IN THE HOUSE WHERE OFFENDER WAS LOCATED, PLACED IN CUSTODY, MIRANDIZED AND TRANSPORTED TO 022 DISTRICT FOR PROCESSING.	
COURT INFO	Desired Court Date: 22 October 2014 Branch: 61-2 555 W HARRISON ST - Room 40 Court Sgt Handle? Yes Initial Court Date: 09 October 2014 Branch: 64-2 555 W HARRISON ST - Room 302 Docket #:	BOND INFO
	BOND INFORMATION NOT AVAILABLE	

ARREST REPORTING

REPORTING PERSONNEL

ATTESTING OFFICER:

I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.

Attesting Officer: #11981 FLORES, V M [REDACTED] 08 OCT 2014 12:50

ARRESTING OFFICER(S):

1st Arresting Officer: #11981 FLORES, V M [REDACTED] Beat 2262D

2nd Arresting Officer: #19202 LAGUNAS, S [REDACTED] 2262D

APPROVING SUPERVISOR:

Approval of Probable Cause : #1972 LEWIS, A M [REDACTED] 08 OCT 2014 12:56

ARREST PROCESSING REPORT

LOCKUP KEEPER PROCESSING

INTERVIEW LOG

VISITOR LOG

Holding Facility: District 022 Lockup
 Received in Lockup: 08 October 2014 14:07
 Prints Taken: 08 October 2014 14:07
 Palmprints Taken: Yes
 Photograph Taken: 08 October 2014 14:29
 Released from Lockup: 09 October 2014 06:33

Time Last Fed:
 Time Called: Phone#: [REDACTED]
 Cell #: 8
 Transport Details : 2PO 2262D 08-OCT-2014 11:00

VISUAL CHECK OF ARRESTEE

Is there obvious pain or injury? No
 Is there obvious signs of infection? No
 Under the influence of alcohol/drugs? No
 Signs of alcohol/drug withdrawal? No
 Appears to be despondent? No
 Appears to be irrational? No
 Carrying medication? No

ARRESTEE QUESTIONNARIE

Presently taking medication? No
 (if female) are you pregnant? No
 First time ever been arrested? No
 Attempted suicide/serious harm? No
 Serious medical or mental problems? No
 Are you receiving treatment? No
 Transgender/intersex/gender non-conforming? No
 Deaf/hard of hearing-request interpreter for court? No
 Interpreter needed? (indicate language) No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

LOCKUP KEEPER COMMENTS:

EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

NO INTERVIEWS LOGGED

NO VISITORS LOGGED

MOVEMENT LOG INFORMATION NOT AVAILABLE

Watch Commander Comments:

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

ARRESTEE PROCESSING PERSONNEL:

		Beat
Searched By:	GOUGIS, R D	
Lockup Keeper:	GOUGIS, R D	
Assisting Arresting Officer:	#12759 OSULLIVAN, D M	2262E
Assisting Arresting Officer:	#18020 KOS, E	2262A
Assisting Arresting Officer:	#1900 ROCHOWICZ JR, R A	2262
Assisting Arresting Officer:	#19937 KORBAS, D R	2262A
Assisting Arresting Officer:	#5605 MORRIN, D J	2262E
Assisting Arresting Officer:	#7811 GREVE, T D	2212
Fingerprinted By:	GOUGIS, R D	

APPROVAL PERSONNEL:

	Beat
Final Approval of Charges : #1171 LONG, C J	08 OCT 2014 16:15